

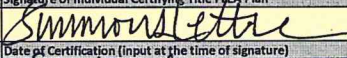


Part 1: Local Educational Agency Information

Name of Local Educational Agency	Name of LEA Executive Director (Public Charter Schools Only)
Capital City PCS	Karen Dresden
Full Address of Local Educational Agency	Email Address of LEA Executive Director (Public Charter Schools Only)
100 Peabody Street NW Washington DC 20011	kdresden@ccpcs.org
Main Telephone Number of Local Educational Agency	Telephone Number of LEA Executive Director (Public Charter Schools Only)
202-808-9800	202-808-9800
Name of Primary LEA Contact for Title I LEA Plan	Name of Additional LEA Contact for Title I LEA Plan
Megan Reamer	Laura Montas
Position Title of Primary LEA Contact for Title I LEA Plan	Position Title of Additional LEA Contact for Title I LEA Plan
Director of Data and Accountability	Compliance Associate
Email Address of Primary LEA Contact for Title I LEA Plan	Email Address of Additional LEA Contact for Title I LEA Plan
mreamer@ccpcs.org	lmontas@ccpcs.org
Telephone Number of Primary LEA Contact for Title I LEA Plan	Telephone Number of Additional LEA Contact for Title I LEA Plan
202-808-9800	202-808-9800

Part 2: LEA Certification

I certify that all of the information contained in this application is true and accurate to the best of my knowledge.
Additionally, I certify that the LEA agrees to all assurances included in the application.
I have been authorized to file this application on behalf of the agency named above.

Name of Individual Certifying Title I LEA Plan (Board Chairperson or Chancellor only)	Signature of Individual Certifying Title I LEA Plan
Simmons Lettre	
Title of Individual Certifying Title I LEA Plan (Board Chairperson or Chancellor only)	Date of Certification (Input at the time of signature)
Board Chairperson	September 16, 2013

SUBMIT BOTH A MICROSOFT EXCEL VERSION OF THIS FULL WORKBOOK AND A SIGNED, SCANNED COPY OF THIS PAGE BY EMAIL TO CON.APP@DC.GOV.

OSSE Use Only

Date Title I LEA Plan First Received:	
---------------------------------------	--